Recipient Committee Campaign Statement Cover Page		City Clerk's
SEE INSTRUCTIONS ON REVERSE	Statement covers period from $9-25-16$ through $10-22-16$	Date of election if applicable: (Month, Day, Year)  1/-8-/6
** ** ** ** ** ** ** ** ** ** ** ** **	Control of the second of the s	

**COVER PAGE** CALIFORNIA FORM tamp s Office Page 2016 For Official Use Only VED

EE INSTRUCTIONS ON REVERSE	through 10-22-16	17-8-76				
. Type of Recipient Committee: All Committees - Con	2. Type of Statement:					
State Candidate Election Committee  Recall (Also Complete Parl 5)  General Purpose Committee  Sponsored  Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Uso Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain be	•	Quarterly State Special Odd-Ye		
. Committee Information	NUMBER 1387/50	Treasurer(s)				
committee name (or candidate's name if no committee)  Tennifer Strohfus 4 Milpita	5 City Council 2016		stroh fus			
,	<b>~</b>	MAILING ADDRESS 211 Hea	ath St			
STREET ADDRESS (NO P.O. BOX)  211 Heath St		Milpitas	STATE CA	ZIP CODE 95035	AREA CODE/PHONE 4086368953	
	de area code/Phone 5035 4086368954	NAME OF ASSISTANT TREASURER	R, IF ANY			
MAILING ADDRESS (F DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS				
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	S			
. Verification						

4

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

	•
Executed on	7-26-16
10	1-26-16
Executed on	Date
Executed on	
Excess an Example 1	Date
Executed on	ar annumentatura (SA, adalah Sa) Sajaragan (SA, Albaga Annum (SA) Sajaraga (Sa) Sajara (SA) Sajaraga (SA) Saja

₽v	Van Stroklus
D, 2022	Signature of Transfurer or Transfurer
By	ignature of Controlling Officeholder, Candidate State Measure Proponent or Responsible Officer of Sponsor
Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent

#### Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460
FORM 13
Page of/

5.	Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballo	ot Measure	Committee		
	NAME OF OFFICEHOLDER OR CANDIDATE  Jennifer Strohfus	, 10-10-10-10-10-10-10-10-10-10-10-10-10-1		NAME OF BALLOT MEASURE				
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI			Identify the controlling offic		· · · · · · · · · · · · · · · · · · ·	sure propo	onent, if any.
	Related Committees Not Included in this State not included in this statement that are controlled by you or contributions or make expenditures on behalf of your candi	ement: List any committees are primarily formed to receive		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PE		TRICT NO. II	FANY
`*	COMMITTEE NAME JenniferStranfus 4MilpitasCityCouncil 2016 NAME OF TREASURER	I.D. NUMBER  138 7150  CONTROLLED COMMITTEE?	7.	. Primarily Formed Can	didate/Offic	ceholder Comm	nittee Lis	it names of
	Dan Strohfus  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO  211 Heath St	YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
	Milpitas CA 950			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
	NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO			Att	ach continuat	ion sheets if neces	ssarv	
				All	aon communi	6176513 11 176666	,	

# Campaign Disclosure Statement Summary Page

to whole dollars.

Amounts may be rounded

CALIFORNIA FORM Statement covers period

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dan Strokfus

I.D. NUMBER 138 7150

SUMMARY PAGE

Contributions Received  1. Monetary Contributions	* 7593.00  \$ 7593.00  \$ 7593.00  \$ 7593.00	\$   (45/.00 830.00 \$   1228/.00 \$   228/.00	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$
Expenditures Made  6. Payments Made	\$ 6094.17 0 \$ 6094.17 850.00 0 \$ 6944.17	\$ 10236,95 0 \$ 10236,95 850,00 0 \$ 11086,95	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)
Current Cash Statement  12. Beginning Cash Balance	7593.00 0 6094.17 2044.05 \$ 0 \$ 0	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	*Amounts in this section may be different from amounts reported in Column B.  FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-3772

#### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from 2-25-/6	CALIFORNIA 460
through 10-22-16	Page 4 of <u>13</u>
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dan Strokfus

9-27-16 Basi 148 Mi 9-28-16 lul 9-28-16 Zhi 9-28-16 Mi 9-28-16 We	JIMONTUS			with the second	/ / /	8 7150
9-28-16 14 1 9-28-16 70 9-28-16 90 Mi	NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9-28-16 14 1 9-28-16 90 Mi 9-28-16 We	asu Gopal Shanmugam 487 Platt Ave Nilpitas CA 95035	∭IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer Cisco	50	150	
9-28-16 Zhi 90 Mi 9-28-16 We	Meng Tom Ho 60 Aberdeen Way 9: Nitas CA 95035	☑IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	IC Designer IOTA Technology	250	250	
9-28-16 W	Thoman Wan Po Calypso Ln Milpitas CA 95035	⊠IND □ COM □ OTH □ PTY □ SCC	Sr. VP Air mada Technology	250	250	
7	Venhao Qiao 431 Yellowstone Ave 1 Ipitas CA 95035	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer Western Digital	100	100	
		□IND □COM □OTH □PTY □SCC				

SUBTOTAL \$ 650,00

#### **Schedule A Summary**

- 1. Amount received this period itemized monetary contributions.

  (Include all Schedule A subtotals.)

  2. Amount received this period unitemized monetary contributions of less than \$100 ....\$

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 9-25-/6	CALIFORNIA 460
through 10-22-16	Page
	1.D. NUMBER 1387150

NAME OF FILER	an Strokfus					UMBER 387150
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9-30-16	Huanhui Zhao 47656 Fortner St. Fremont CA 94539	NIND COM OTH PTY SCC	Sr Software Eng. Intel	200	200	
	May Lee 150 Beaumere Way Milpitas CA 95035	⊠IND □ COM □ OTH □ PTY □ SCC	Accountant Everything Industi	nal 100	100	
9-30-16	Wen Chen 2055 Field crest Dr Milpitus 9A 95035	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	100	100	·
	Anne Wang 1878 CraterLake Ave Milpitas CA 95035	IXIND □ COM □ OTH □ PTY □ SCC	Marketing Analyst Fire Eye Inc	100	100	
10-1-16	Qiong Zhang 740 Superior Rd Milpitas CA 95035	XIND COM OTH PTY SCC	Nomemaken	100	100	
SUBTOTAL\$ 600.00						

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from $9-25-/6$	CALIFORNIA 460
through 10-22-16	Page _ 6 of _ /3
	I.D. NUMBER

Dan Strokfus 130 1130 IF AN INDIVIDUAL, ENTER CUMULATIVE TO DATE PER ELECTION AMOUNT CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE CODE \* (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) M)ND V S Rao Nadendla 758 Vasona St. □сом 100 100 □отн Marger: □ PTY Milpitas CA 95035 □scc 10-10-16 Tra Inc 904 Hamilton Ave Milpitas VA 95035 CEO 200 □ СОМ 200 Tia Inc HTΩ**X** PTY SCC 10-10-16 423 Georgetown Ave San Mateo, CA 94402 XIND □ COM Engineer 100 100 □ OTH □ PTY SCC XIND Engineer бсом 250 250 Cisco □отн □ PTY □ scc ⊠IND □COM Rosheni Fernando 50 100 Synapse Design Потн ☐ PTY 95035 SCC 700,00 **SUBTOTAL \$** 

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

C+215-

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 9-25-/6	CALIFORNIA 460
through 10-22-16	Page 7 of 13
<u> </u>	1.D. NUMBER 1287150

	Van Stroktus				15	88 1150
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	George Liu 677 Vasona St Milpitas CA 95035	Ď(ND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Software Engineer AMazon	150	150	
10-19-16	Rosheni Fernando 2386 Lacey Dr Milpitas CA 95035	GIND COM OTH PTY SCC	H.R. Synapse Design	50	100	
10-20-16	Teresa Tong Liu 1236 Sierra Village pl. San Jose . CA95132	MIND COM OTH PTY SCC	retired	100	100	
10-20-16	Frank Lin 94 Castillo Ln Milpitas CA 95035	□ COM □ OTH □ PTY □ SCC	retired	100	100	
10-20-11	Tingyi Xu 48273 Lakeview Blud Fremont CA	DIND COM OTH PTY SCC	Manager Myntahl Corp	250	250	
			SUBTOTAL \$	650.00		

\*Contributor Codes

IND – Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 9-25-16	california 460 form
through 10-22-16	Page 9 of 13
	1.D. NUMBER 1387150

Strohfus PER ELECTION IF AN INDIVIDUAL, ENTER CUMULATIVE TO DATE AMOUNT CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER RECEIVED THIS CODE \* (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF SELF-EMPLOYED, ENTER NAME RECEIVED (JAN. 1 - DEC. 31) (IF REQUIRED) PERIOD OF BUSINESS) Larry Nichols 1044 N. Capitol Ave Sun Jose CA 951833 CEO CINI 💢 250 250 Псом Steri-Tek Потн □ PTY SCC Basu Gopal Shanmugam 1487 Platt Ave X(IND Engineer 10-20-16 150 ∏сом 100 Cisco □ OTH PTY SCC Engineer Viavi Solutions XIND ПСОМ 100 100 10-20-16 193 Lone tree Ct □отн □ PTY □ scc DNLX Hudware Engineer □сом 200 100 Google □отн □ scc Financia Analyst ZIND 100 Псом 100 Universal Andro □ OTH PTY □ scc 650.00 SUBTOTAL \$

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY -- Political Party

SCC - Small Contributor Committee

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 9-25-/6	CALIFORNIA 460
through 10-22-16	Page 8 of 13
	1.D. NUMBER 1387/50

Dan Strokfus CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER AMOUNT CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER CALENDAR YEAR TO DATE RECEIVED THIS CODE \* (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF SELF-EMPLOYED, ENTER NAME RECEIVED (JAN. 1 - DEC. 31) (IF REQUIRED) PERIOD Manager XIND 10-20-16 44709 Aguila Ferrace Framont CA 94539 Псом 250 250 Myntahl Corp OTH □ PTY □ scc 10-20-16 Peter Xu 10-20-16 44709 Aguila Terrace Fremont CA 94539 MHND ☐ COM Un employed 250 250 ☐ OTH □ PTY SCC 10-20-16 44709 Aguilla Terrace MIND retired 250 250 ſΠcom ☐ OTH PTY Fremont CA SCC 10-20-16 39713 Placer Way XIND □ COM Engineer VArmorer 250 250 □отн ☐ PTY □scc 10-20-16 39713 Placer Way Fremont CA 94538 Manager **⊠**JND 250 250 Псом Ningbo East Electronics ☐ OTH PTY □ scc SUBTOTAL \$ /2 50.00

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 9-25-16	california 460 form
through 10-22-16	Page 10 of 13
	1.D. NUMBER 1387150

NAME OF FILER	Dan Strohfus				1.5. 1.5	387150
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10-7-16	Rajmohan Rajamariappan 356 Silvem St. Milpitas CA 95035	MIND COM OTH PTY SCC	Sonier Director Viewics Inc	200	200	
10-7-16	David N. Hufton 1455 Fontamblea Ave Milpitas CA 95035	☑IND   ☐ COM   ☐ OTH   ☐ PTY   ☐ SCC	retired	200	200	
10-11-16	Li Huang 563 Maple Ave Milpitas CA 95035 Jaya Prakash Upparlapalli 39975 Cedar Blvd #243	MIND COM OTH PTY SCC	Sr Engineering Manager eltealth Inc	250	250	
10-20-16	Jaya Prakash Upparlapalli 39975 Cedar Blvd #243 Newark, CA 94560	XIND COM OTH PTY SCC	Account Exec Myntahl Corp	250	250	
		□IND □COM □OTH □PTY □SCC				
			SUBTOTAL \$	900,00		nijais pieropsis silvassa juu

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.					ers period	59850 S 550 S 5 6 7 5	CALIFORNIA 460 FORM	
SEE INSTRUCTIONS ON REVERSE					through 10-	22-16	Page	of_/3	
NAME OF FILER Dan Strohfus	\$						1.D. NUMBER 138	7150	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Jennifer Strohfus 211 Heath St. Milpitas CA 95035  Talind GOM GOTH GPTY GSCC	Office Pirector Happy Coding School	, <i>\$30.0</i> 0	s_0,0	PAID  SO FORGIVEN  \$	\$ 30.00 DATE DUE	% RATE	\$ 870.0° 7-/8-/6 DATE INCURRED	calendar year  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
<sup>†</sup> □IND □ COM □ OTH □ PTY □ SCC		\$	\$	PAID  FORGIVEN  PAID  PAID  FORGIVEN	DATE DUE	**************************************	S  DATE INCURRED  \$	CALENDAR YEAR  \$ PER ELECTION**  \$ CALENDAR YEAR  \$ PER ELECTION**	
<sup>↑</sup> □IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS \$	,	\$	\$	\$			
Schedule B Summary  1. Loans received this period				\$	0	(Enter (e) on Schedule E, Line			
<ul><li>(Total Column (b) plus unitemized loan</li><li>2. Loans paid or forgiven this period</li><li>(Total Column (c) plus loans under \$1 (Include loans paid by a third party that</li></ul>	00 paid or forgiven.)			\$	0		†Contributor Codes IND – Individual COM – Recipient C (other than OTH – Other (e.g., PTY – Political Par	Committee PTY or SCC) business entity)	
3. Net change this period. ( <b>Subtract</b> Lin Enter the net here and on the Summa			***************************************		May be a negative number)		SCC – Small Contr		

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

#### Schedule E **Payments Made**

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA **FORM** through 10-22-16 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 128 7/50 10

CODES: If one of the following codes accurately describes  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and st POS postage, deliv	munications I appearances es ating urvey research very and messenger services	Otherwise, of RAD RFD SAL TEC TRS TSF VOT	describe the payment.  radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production candidate travel, lodging, and meal staff/spouse travel, lodging, and metransfer between committees of the voter registration	ls eals
LEG legal defense LIT campaign literature and mailings	PRO professional : PRT print ads	services (legal, accounting)			net, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ang anggapini mana an an an anggapini di dagan an an anggapini dagan an a	CODE OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
High Tech Printing 511 Los Coches St Milnites CA 95035		417			850.00

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYME	ENT AMOUNT PAID
High Tech Printing 511 Los Coches St Milpitus CA 95035	417	850.00
Advertises Mailing Service 1725 De La Cruz Blvd #6 Sunta Clara CA 95050	417	2477.03
Advertisery Mailing Service 1725 De La Cruz Blud +6 Santa Clara CA 95050	217	2451.08

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 

#### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) 2. Unitemized payments made this period of under \$100.....\$ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....\$ 

FPPC Form 460 (Jan/2016)

Schedule	∍ F		
Accrued	<b>Expenses</b>	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

**CALIFORNIA** Statement covers period 9-25-16 **FORM** I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1387150 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)		RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)			
CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
417	0	850.00	0	850.00	
SUBTOTALS	<b>S</b> (2)	s 850.00 s		\$ 850.00	
	MBR member communication MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads  CODE OR DESCRIPTION OF PAYMENT	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads  CODE OR DESCRIPTION OF PAYMENT  (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO print ads  CODE OR DESCRIPTION OF PAYMENT  CODE OR DESCRI	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads  CODE OR DESCRIPTION OF PAYMENT  CODE OR DESCRIPTION OF PAYMENT	

#### Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for	FALSE 850-0
accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	ALS \$

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and 

Recipient Committee
Campaign Statement
Cover Page

Statement covers period from 7-1-16 | Date of election if ap (Month, Day, Ye

Executed on \_\_\_\_\_

COVER PAGE

City Clerk'S Office CALIFORNIA 460

SEP 2 8 2016

Page 1 of 11

For Official Use Only

NET NOTE VOTICUE ON DE VERSE	from 9-24-16	Month, Day, Year)	receiv		For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	marily Formed Ballot Measure mmittee Controlled Sponsored Ocomplete Part 6) marily Formed Candidate/ ficeholder Committee Ocomplete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	ermination)	☐ Quarteriy Sta☐ Special Odd-	
	NUMBER 187150	Treasurer(s)  NAME OF TREASURER  Dan Strohfus  MAILING ADDRESS  211 Heath St			
STREET ADDRESS (NO P.O. BOX)           211 Heath St           CITY         STATE         ZIP CODE           Milpitas         CA         95035           MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	AREA CODE/PHONE 4086368954	CITY Milpitas NAME OF ASSISTANT TREASURE MAILING ADDRESS	STATE CA R, IF ANY	ZIP CODE 95035	AREA CODE/PHONE 4086368953
CITY STATE ZIP CÖDE  OPTIONAL: FAX / E-MAIL ADDRESS	E AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDRES	STATE	ZIP CODE	AREA CODE/PHONE
I. Verification I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Control of Executed on 9-25-16  Executed on 9-25-16  Executed on Date  Executed on Date	alifornia that the foregoing is true and or  By	nowledge the information contained orrect.  Signature of Treasyler or Assistant fing Officeholder, Candidate, State Measure Proposition of Controlling Officeholder, Candidate,	Treasurer oponent or Responsible Office		is true and complete. I

Signature of Controlling Officeholder, Candidate, State Measure Proponent

6. Officeholder or Candidate Controlled Commit	itee	6.	Primarily Formed Ballo	t Measure (	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Jennifer Strohfus							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIC	N .		SUPPORT
Milpitas City Council							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	Y STATE ZIP					-	
211 Heath St., Milpitas,	CA 95035		Identify the controlling office	holder, candi	date, or state	measure prop	onent, if any.
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PRO	OPONENT		•
Related Committees Not Included in this Stat not included in this statement that are controlled by you or a contributions or make expenditures on behalf of your candidate.	are primarily formed to receive		OFFICE SOUGHT OR HELD	***************************************		DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER						
JenniferStrohfus4MilpitasCityCouncil2016	1387150	7	Drimoville Formed Cons	lidata/Offia	ah aldar Ca	mana ista a	
NAME OF TREASURER	CONTROLLED COMMITTEE?	/.	Primarily Formed Cand officeholder(s) or candidate(s)	for which this	enolaer Co committee is p	mmittee Li primarily forme	ist names of ed.
Dan Strohfus	YES NO				Lossies con		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	☐ SUPPORT
211 Heath St.,					+		OPPOSE
CITY STATE ZIP CO			NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
Milpitas Ca 9503	4086368954						OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	YES NO						SUPPORT OPPOSE
CITY STATE ZIP CO			Atta	ch continuatio	on sheets if n	ecessary	<u> </u>

#### **Campaign Disclosure Statement Summary Page**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

C.I	1K	AR.	۸۸	DV	D٨	CF.

Stateme	ent covers period 7-1-16	CALIFORNIA 460
through	9-24-16	Page
- I		I.D. NUMBER
		1387150

Daniel Strohfus Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR Running in Both the State Primary and TOTAL TO DATE General Elections 3858.00 3858.00 1. Monetary Contributions Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 830.00 830.00 2. Loans Received ...... Schedule B, Line 3 4688.00 20. Contributions 4688.00 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 0.00 0.00 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 4688.00 4688.00. Made **Expenditures Made Expenditure Limit Summary for State** 4142.78 4142,78 **Candidates** 0.00 0.00 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 4142.78 4142.78 (If Subject to Voluntary Expenditure Limit) 0.00 0.00 Date of Election Total to Date 0.00 0.00 (mm/dd/yy) 4142.78 4142.78 **Current Cash Statement** 0.00 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ To calculate Column B. 4688.00 add amounts in Column A to the corresponding \*Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 amounts from Column B reported in Column B. 4142.78 of your last report. Some amounts in Column A may 545.22 be negative figures that 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 \$ should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being 0.00 filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B. Part 2 \$ only carry over the amounts. from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 0.00 830.00

### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary	Contributions Received	from7-1	1-16	CALIFORNIA / CAL			
				through 9-	24-16	Page _	4 of 11
NAME OF FILER	ONS ON REVERSE					I.D. NUM	BER
Daniel Stro	ohfus					138715	0
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	THIS CALENDAR YEAR		PER ELECTION TO DATE (IF REQUIRED)
7-11-16	James Nippes 675 Sharon Park Dr, #243 Menlo Park, CA 94025	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired	250.00	250.00		
7-23-16	Yue Liu 677 Vasona St Milpitas, CA 95035	☑ IND □ COM □ OTH □ PTY □ SCC	Engineer Amazon Inc	100.00	100.00		
7-23-16	Xiang Yao 4100 Osgood Rd Fremont, CA 94539	IND COM OTH PTY SCC	Engineer Western Digital	100.00	100.00		
7-22-16	Vivian Strohfus 1705 S Woodland Pl Santa Ana, CA 92707	☑ IND □ COM □ OTH □ PTY □ SCC	Student USC	250.00	250.00		
7-24-16	Xin Ni 3387 Hartwell et Pleasanton, CA94588	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Software Engineer Safeway Inc	100.00	100	.00	
			SUBTOTAL \$	800.00			
Schedule	A Summary				(*Cor	ntributor Co	odes
	eceived this period – itemized monetary contributions. all Schedule A subtotals.)		\$	2500.00	1		al ent Committee han PTY or SCC)
2. Amount re	eceived this period – unitemized monetary contribution	ns of less tha	n \$100\$	1358.00			e.g., business entity)
3. Total mon	netary contributions received this period. es 1 and 2. Enter here and on the Summary Page, Col			3858.00			Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

		from	-10	FORM						
				through9-2	24-16 F	Page 5 of 11				
NAME OF FILER		<u> </u>			.D. NUMBER					
Daniel Strohf	Daniel Strohfus									
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE				
9-19-16	John Angwin 48882 Sauvignon Ct Fremont, CA 94539	☑ IND □ COM □ OTH □ PTY □ SCC	Software Architect Buzzway Inc	100.00	100.00	)				
7-26-16	David Song 397 Rudyard Dr Milpitas, CA 95035	☑ IND □ COM □ OTH □ PTY □ SCC	Sr Staff Engineer Juniper Networks	100.00	100.00					
7-27-16	Honggan Shen 512 Hamilton Ave Milpitas, CA 95035	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Hardware Engineer Google Inc	100.00	100.00					
7-29-16	Shaomei Zhang 1715 QUEENS Crossing Dr San Jose CA 95132	☑IND □COM □OTH □PTY □SCC	Stay home Mom	100.00	100.06	)				
8-26-16	Patrick Wong 1315 Merry Loop Milpitas CA 95035	☑IND □COM □OTH □PTY □SCC	Project Manager Pinger Inc	100.00	100.00					
			SUBTOTAL \$	\$ 500.00						

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from/-1	-16	FORM		
				through9-2	24-16		of	
Daniel Stro	hfus					I.D. NUMBER 1387150	₹	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
7-24-16	Yanping Zhao 3038 McFinley Dy Santa CA 950 Fi Clava	☑IND □COM □OTH □PTY □SCC	Software Engineer  (MPRY 0 Technologies)	100.00 ies	100.0	00		
7-24-16	Johnathon Yu 39355 California St. #201B Fremont, CA 94538	☑IND □COM □OTH □PTY □SCC	Financial Services Consultant TFA	200.00	200.00			
7-24-16	Tony Xu 39510 Paseo Padre Pkwy, #310 Fremont, CA 94538	☑IND □COM □OTH □PTY □SCC	Realtor Nautilus Global Real Estate	100.00	100.0	00		
7-24-16	Roman Chen 701 First Ave Sunnyvale, CA 94089	☑IND □COM □OTH □PTY □SCC	Engineer Yahoo Inc	100.00	100.0	00		
7-25-16	Jing Sun 60 Cody Ln Los Altos, CA 94022	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer Cisco Systems	100.00	100.0	00		
SUBTOTAL \$ 600.00								

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received	Am	Amounts may be rounded to whole dollars.			Statement cov	ers period 1-16	SCHEDULE B - PART 1  CALIFORNIA 460  FORM		
EE INSTRUCTIONS ON REVERSE					through9-	-24-16	_ Page	of	
IAME OF FILER							I.D. NUMBER		
Daniel Strohfus							1387150		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOI	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	3 AMOUNT OF	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
lennifer Strohfus 211 Heath St. Milpitas CA 95035	Office Director Happy Coding School			PAID  \$ FORGIVEN	\$ 830.00	% RATE	\$ 830.00	\$ 830.00 PER ELECTION**	
☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$ 830.00	\$	DATE DUE	\$	7-18-16 DATE INCURRED	\$	
				PAID  FORGIVEN	s	% RATE	\$	\$PER ELECTION*	
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
				PAID  \$ FORGIVEN	\$	%	6 \$	\$PER ELECTION*	
IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS S		\$	\$	\$	gardinamen etter. Rijerijan medele	arskald des Guldski	
Schedule B Summary  1. Loans received this period				\$	830.00	(Enter (e) or Schedule E, Lin			
(Total Column (b) plus unitemized loar		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1	†Contributor Codes	;	

IND – Individual
COM – Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

Schedule C Nonmonetary Contributions Received		Amounts may be rounded						SCHEDULE O		
			to whole dollars.		State	ement covers		CALII OKINA A		
					from	7-1-16	<u>i</u>	FOI	RM TOO	
					through	h9-24-	16	Page	8 of	
SEE INSTRUCTION NAME OF FILER	4S ON REVERSE							I.D. NUMB	3ER	
Daniel Stroh	nfus							138715	0	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION O GOODS OR SERVI		AMOUNT/ FAIR MARKET VALUE	CALEND.	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC								
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC								
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC								
		□ IND □ COM □ OTH □ PTY □ SCC								
Attach addition	ional information on appropriately labeled	1 continuation	sheets.	SUBTO	STAL \$				e to the single means of the sole of sole of the significant	
Schodule (	C Summary						(**	ontributor Co	and an	
1. Amount red	ceived this period – itemized nonmonetall Schedule C subtotals.)	ry contribution	ns.		\$	0.00	INE	D — Individua DM — Recipie		
2. Amount red	ceived this period – unitemized nonmone	etary contribut	tions of less than \$100	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	0.00			e.g., business entity)	
3. Total nonm	nonetary contributions received this perio	od.				0.00	sc		Contributor Committee	

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)......TOTAL \$

0.00

Schedule E Payments Made	Amounts may be rounded to whole dollars.			from	7-1-16 9-24-16	CALIFO	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through		Page	
Daniel Strohfus						138715	0
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and si POS postage, deli	munications d appearances es ating urvey research	er services	RAD radio a RFD return SAL campa TEL t.v. or TRC candic TRS staff/s TSF transfe VOT voter i	airtime and productions of contributions aign workers' salarie cable airtime and protect travel, lodging, appose travel, lodging, appose travel, lodging	on costs s oduction costs and meals g, and meals ees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	<u> </u>	CODE OR	DES	CRIPTION OF PA	YMENT		AMOUNT PAID
Jia Liang 1731 Starlite Dr Milpitas, CA 95035		СМР					500.00
Jia Liang 1731 Starlite Dr Milpitas, CA 95035		СМР					280.00
Jia Liang 1731 Starlite Dr Milpitas, CA 95035		CMP					250.00
* Payments that are contributions or independent expenditures must also	be summarized on Sche	edule D.	18.1			SUBTOTAL S	1030.00
Schedule E Summary							
Itemized payments made this period. (Include all Schedu	ile E subtotals.)			••••	.,,.,,	\$	3936.00
2. Unitemized payments made this period of under \$100							206.78
3. Total interest paid this period on loans. (Enter amount fro	om Schedule B. Par	t 1. Column (e)	).)			\$	0.00

4142.78

### Schedule E (Continuation Sheet)

Amounts may be rounded to whole dollars.

	SCHEDOLE E (CONT.
Statement covers period	CALIFORNIA / CO
from 7-1-16	FORM 400
through9-24-16	Page <u> </u>
and the state of t	I.D. NUMBER
	1387150

**Payments Made** SEE INSTRUCTIONS ON REVERSE NAME OF FILER Daniel Strohfus

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PHO phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* PRO professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (internet, e-mail) LIT campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) City of Milpitas Statement of Qualification fee 455 E Calaveras Blvd. 1910.00 Milpitas, CA 95035 Reliable Signs (Online order) 280.00 CMP Reliable Signs (online order) 336.00 CMP Reliable Signs (online order) 280.00 CMP Hi-tech Color Print 511 Los Coches St 100.00 CMP Milpitas, CA, 95035

**SUBTOTAL \$** 2906.00 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SCHEDU	11 1	~	$( \bigcirc \bigcirc )$

#### Schedule E (Continuation Sheet) **Payments Made**

Amounts may be rounded to whole dollars.

		SOUIEDOLL L (	CONTA
Statement covers period		CALIFORNIA 160	
from	7-1-16	FORM	Ψ,
through_	9-24-16	Page	i
***************************************		I.D. NUMBER	
		4007450	

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Daniel Strohfus 1387150

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications MTG meetings and appearances RFD returned contributions CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating PHO phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees FIL POL polling and survey research TRS staff/spouse travel, lodging, and meals fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF independent expenditure supporting/opposing others (explain)\* PRO professional services (legal, accounting) VOT voter registration legal defense WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **ARCO** gasoline 43 S Abbott Ave, 34.88 TRC Milpitas, CA 95035 online donation charges Paypal 2211 N 1st St. 70.81 San Jose, CA 95131 Voter list Santa Clara County Voter Registrar 70 W Hedding St, 80.00 San Jose, CA 95110 Online donation App. Facebook 1601 Willow Rd 1.55 Menlo Park, CA 94025

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 

187.24